



AP7 Rec'd PCT/PTO 07 APR 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Patent Examining Operations

Applicant(s): Heeney, et al.

Serial No: 10/502,031

Filed: July 20, 2004

Title: Treatment of MS with Goat Serum

Docket No.: 430500-11

Customer No.: 27162

TRANSMITTAL LETTER

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

SIR:

Enclosed please find the following:

1. Petition For Revival of An Application for Patent Abandoned Unintentionally;
2. Declaration executed by Gareth Williams;
3. Declaration executed by Angus George Dalgleish and Stanley D.T. White;
4. Check in the amount of \$1,500.00; and
5. A self-addressed, postage paid, return receipt postcard, date stamp and return of which is respectfully requested.

The Commissioner is authorized to charge payment of any additional filing fees required under 37 C.F.R. 1.16 associated with this communication or credit any overpayment to Deposit Account No. 03-0678.

FIRST CLASS CERTIFICATE

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Raymond J. Lillie 4/3/06
Raymond J. Lillie, Esq. Date

Respectfully submitted,

Raymond J. Lillie
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Applicant(s): Heeney, C et al.

Please imprint the PTO date
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Serial No.: 10/502,031 Filed: July 20, 2004
Pat./Reg. No.: _____ Issued: _____
Title (or mark): Treatment of MS with Goat
Serum

DOCUMENTS ENCLOSED

- | | |
|---|--|
| <input type="checkbox"/> Priority Appln. Serial No. _____ | <input type="checkbox"/> Certified Copy Priority Doc |
| <input type="checkbox"/> Application Sheets: | |
| Specification _____ Abstract _____ Claims _____ | <input type="checkbox"/> Drawings: <input type="checkbox"/> Informal _____ <input type="checkbox"/> Formal _____ |
| <input checked="" type="checkbox"/> Declaration (executed <u>3-20-06, 1-19-05 & 1-18-05.</u>) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Assignment to: _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Claim to Small Entity Status | <input type="checkbox"/> Preliminary Amend _____ |
| <input type="checkbox"/> Response to OA dated _____ | <input type="checkbox"/> Type of OA _____ |
| <input type="checkbox"/> Issue Fee Transmittal | <input type="checkbox"/> _____ Month Ext. of Time |
| <input type="checkbox"/> Sequence List <input type="checkbox"/> Paper <input type="checkbox"/> Disc | <input type="checkbox"/> Inform. Discl. Statement <input type="checkbox"/> PTO 1449 |
| <input type="checkbox"/> Letter to Official Draftsperson | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Drawing sheets: Formal _____ Informal _____ | <input type="checkbox"/> 37 CFR 1821 (1) Statement |
| <input checked="" type="checkbox"/> Check Amount \$ <u>1,500.00</u> No. <u>12507</u> | <input checked="" type="checkbox"/> Petition <u>For Revival of an Application</u> |
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ATTORNEY: BJL Docket NO.: 430500-11

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